AMENDMENTS TO THE CLAIMS

The following Listing of Claims replaces all prior versions, and listings, of claims.

LISTING OF CLAIMS

1. – 31. (Cancelled).

32. (Currently Amended) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering an insulin analogue to said critically ill patient or CIPNP patient in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said insulin analogue is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more.

33. (Previously Presented) The method of claim 32, wherein said insulin analogue is Asp^{B28} human insulin.

34. (Previously Presented) The method of claim 32, wherein said insulin analogue is Lys^{B28}, Pro^{B29} human insulin.

35. (Currently Amended) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering an active derivative of an insulin analogue or a physiologically acceptable salt of said derivative to said critically ill patient or CIPNP patient in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said insulin analogue is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more.

36. (Previously Presented) The method of claim 35, wherein said active derivative of an insulin analogue is des-Thr^{B30} human insulin γ Lys^{B29} tetradecanoyl.

37. – 61. (Cancelled).

62. (Currently Amended) The method of claim 3240, wherein the patient is a human.

63. (Previously Presented) The method of claim 62, wherein the patient is non-diabetic.

64. (Currently Amended) The method of claim 3541, wherein the patient is a human.

65. (Previously Presented) The method of claim 64, wherein the patient is non-diabetic.

66. – 86. (Cancelled).

87. (New) The method of claim 32, wherein said patient is fed with a standardized feeding schedule of either total parenteral, combined parenteral/enteral or full enteral feeding.

88. (New) The method of claim 35, wherein said patient is fed with a standardized feeding schedule of either total parenteral, combined parenteral/enteral or full enteral feeding.

89. (New) The method of claim 32, wherein said insulin analogue is administered in a starting dose of 1 U/h.

90. (New) The method of claim 32, wherein said insulin analogue is administered in a starting dose of 2 U/h.

91. (New) The method of claim 35, wherein said active derivative of an insulin analogue or a physiologically acceptable salt of said derivative is administered in a starting dose of 1 U/h.

92. (New) The method of claim 35, wherein said active derivative of an insulin analogue or a physiologically acceptable salt of said derivative is administered in a starting dose of 2 U/h.